

May 2007

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## FROM THE DESK OF THE DDSN MEDICAL CONSULTANT

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### May is National Stroke Awareness Month.

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## STROKE

May is National Stroke Awareness Month. As the people that we care for age, the risk that they will have a stroke increases and we are seeing some of our consumers having strokes or brain attacks as they are sometimes called. We can help reduce problems by prevention and also by quick responses if a brain attack occurs.

A stroke means that a person's function is reduced because their brain has been injured when oxygen and food have not reached the brain tissue. The brain starts to die and causes loss of function. This may be because there is bleeding from a blood vessel but it usually happens because a blood vessel is blocked and the flow of blood carrying the oxygen and nutrients is stopped. Nowadays there are tests that can show what type of stroke has happened and treatment to help can be planned. In the most common form of stroke the use of powerful clot busting drugs within 3 hours of the start of the blockage can help reduce permanent disability and improve survival. Therefore, we need to get help quickly if a brain attack occurs. We know our consumers and their abilities but if there is a sudden loss in abilities we need to think that a brain attack is possible and call 911 or get them to an emergency room quickly to be checked for the cause and the treatment that may be needed.

Please act by getting help quickly if a consumer has a **sudden**:

- Severe, unusual headache, often with vomiting with loss of consciousness or confusion;
- Trouble with seeing in one or both eyes;
- Difficulty speaking or swallowing;
- Difficulty understanding words (sudden change)
- Weakness, numbness, tingling in face, arm or leg on one side of the body;
- Severe dizziness, unsteadiness, lack of coordination or unexplained fall; and,
- Sudden onset of new seizures.

The acute care team will need to know the changes, so please have someone who knows the consumer's usual patterns or has records of their past patterns and examination accompany the consumer to the urgent care center. This helps with the understanding of the possible cause for the changes. There may be other treatable causes also, like blood sugar changes, heart rhythm changes, serious infections, all of which need urgent attention. If a stroke is diagnosed, then treatment choices need to be considered and drugs may be necessary to dissolve or reduce clots, control blood pressure, reduce brain swelling, provide oxygen, and correct irregular heart rhythm if it present. Good care and very active rehabilitation with focus on things like preventing choking, good skin care, bowel and bladder maintenance and mobility/fall monitoring and rehabilitation will be important for us to plan and manage once the acute care in the hospital leads into the recovery phase.

## PREVENTION

We can help when a stroke happens but we also need to help **prevent** the stroke from happening. We can follow guidelines for general cardiovascular health but do need to watch some groups of people more carefully as they may be more at risk for a stroke to happen. We cannot change some factors that make it likely a person will have a stroke but if a person has these factors we need to help even more carefully with the factors we can change.

Factors that increase the chance a person will have a stroke but that we **cannot change** include:

- Increasing age;
- Being the child of parents who had a stroke;
- Having African American heritage; and,
- Person having had stroke or mini-stroke (TIA) or heart attack already.

These areas we note and adjust for.

Factors that increase a person's chance of having a stroke but that **can be changed** include:

- Smoking – number one preventable factor;
- Physical inactivity and obesity – important and increases other risk factors;
- Excessive alcohol use; and,
- Illegal drug use – particularly IV drug abuse and cocaine use.

These areas we can help in the long-term ongoing support of the general good health of our consumers.

Medical factors or areas that we may need to act in to reduce the chance that a person may have a stroke include:

1. *High Blood Pressure* – may be involved in 40% of stroke causes; we need to monitor and manage it constantly.
2. *Diabetes Mellitus* – sugar control will help; particularly need to maintain cholesterol in health levels (note LDL for women and HDL for men).
3. *Heart Disease* – past or current heart disease increases risk of stroke. We need to follow-up well on all heart care, blood pressure, cholesterol, etc. Atrial fibrillation a special risk for stroke. Everyone needs to be checked for irregular heart rate and treatment considered if it is found.
4. *Carotid Artery Disease* – neck arteries (carotids) supply much of brain blood flow. If a person has a bruit (flow noise) in carotids or has had a past stroke or mini-stroke (TIA), further testing and management is wise.
5. *Snoring* – people who snore heavily or have pauses (sleep apnea) appear to have more risk of hypertension and stroke. Evaluation and treatment may be needed.
6. *Medications* that may help reduce the risk that a person may have a stroke include some that improve general health and some that have special help for particular groups of people.
  - a. *Aspirin(low dose daily)* – is used to reduce heart attacks for men over 40 years of age and women over 65 years of age. Helps prevent repeat stroke or TIA in people with a history of brain attacks; appears to reduce the chance of a first stroke in women. Watch for gastrointestinal bleeding as complication of its use.

- b. *Statins* – useful for cholesterol and lipid management (Lipitor, Crestor, etc); may help reduce inflammation of vessels; may reduce a person's risk of having a stroke by 20%.
- c. *B Vitamins* – some reports suggest that stroke risk is reduced if a person has adequate folic acid, B<sub>6</sub>, B<sub>12</sub> intake and also adequate diet helps.

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## CONCLUSIONS

As you can see, good health measures help reduce the chance that a person will have a stroke or brain attack. We can help with these day by day. If we can also act quickly when we see our consumers showing a change in function than we can help reduce the problems that a stroke may cause and also get help if there is another cause for an acute (sudden) change in function.

The general messages of stroke awareness are good for us all – consumers, staff, and families. If we work on small changes at a time but keep with them, then we can all have a healthier life.